

Please type a plus sign (+) inside this box



UTILITY PATENT APPLICATION TRANSMITTAL		Attorney Docket No. 51876P366 First Inventor IHL-HO LEE Title SYNCHRONOUS SEMICONDUCTOR MEMORY DEVICE Express Mail Label No. EV339918145US	
APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning utility patent application contents</small>		ADDRESS TO: <small>Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450</small>	
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <small>(Submit an original and a duplicate for fee processing)</small>		7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)	
2. <input type="checkbox"/> Applicant claims small entity status. <small>See 37 CFR 1.27.</small>		8. Nucleotide and/or Amino Acid Sequence Submission <small>(if applicable, all of the following are necessary)</small>	
3. <input checked="" type="checkbox"/> Specification <small>(preferred arrangement set forth below)</small> <ul style="list-style-type: none"> - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 		a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: <ul style="list-style-type: none"> i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies	
4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 5]		9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))	
5. Oath or Declaration (signed) [Total Pages 3]		10. <input type="checkbox"/> 37 C.F.R. § 3.73(b) Statement <input type="checkbox"/> Power of Attorney <small>(when there is an assignee)</small>	
a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63(d)) <small>(for continuation/divisional with Box 18 completed)</small>		11. <input type="checkbox"/> English Translation Document (if applicable)	
i. <input type="checkbox"/> <u>DELETION OF INVENTOR(S)</u> <small>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</small>		12. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input checked="" type="checkbox"/> Copies of IDS Citations	
6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76		13. <input type="checkbox"/> Preliminary Amendment <input type="checkbox"/> Application Amended to Reflect Claim of Priority	
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:		14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>(Should be specifically itemized)</small>	
		15. <input checked="" type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small>	
		16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). <small>Applicant must attach form PTO/SB/35 or its equivalent.</small>	
		17. <input checked="" type="checkbox"/> Other: <u>Transmittal of Formal Drawings; Request For Priority</u>	
18. CORRESPONDENCE ADDRESS			
<input checked="" type="checkbox"/> CustomerNumberOrBarcodeLabel		 *08791*	
<input type="checkbox"/> Correspondence address below			
Name			
Address			
City		State	Zip Code
Country		Telephone	Fax
Name (Print/Type)		Registration No. (Attorney/Agent)	
Signature		Date <u>7/21/03</u>	



FEE TRANSMITTAL for FY 2003		Complete if Known	
		Application Number	
		Filing Date	
		First Named Inventor	IHL-HO LEE
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.		Examiner Name	
TOTAL AMOUNT OF PAYMENT		(\\$) 790.00	Group/Art Unit
			Attorney Docket No. 51876P366

METHOD OF PAYMENT (check one)		FEE CALCULATION (continued)																																																																																																																																																											
<input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None <input type="checkbox"/> Deposit Account		3. ADDITIONAL FEES <table border="1"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>1051</td> <td>130</td> <td>2051</td> <td>65</td> <td>Surcharge - late filing fee or oath</td> </tr> <tr> <td>1052</td> <td>50</td> <td>2052</td> <td>25</td> <td>Surcharge - late provisional filing fee or cover sheet</td> </tr> <tr> <td>2053</td> <td>130</td> <td>2053</td> <td>130</td> <td>Non-English specification</td> </tr> <tr> <td>1812</td> <td>2,520</td> <td>1812</td> <td>2,520</td> <td>For filing a request for <i>ex parte</i> reexamination</td> </tr> <tr> <td>1804</td> <td>920 *</td> <td>1804</td> <td>920 *</td> <td>Requesting publication of SIR prior to Examiner action</td> </tr> <tr> <td>1805</td> <td>1,840 *</td> <td>1805</td> <td>1,840 *</td> <td>Requesting publication of SIR after Examiner action</td> </tr> <tr> <td>1251</td> <td>110</td> <td>2251</td> <td>55</td> <td>Extension for reply within first month</td> </tr> <tr> <td>1252</td> <td>410</td> <td>2252</td> <td>205</td> <td>Extension for reply within second month</td> </tr> <tr> <td>1253</td> <td>930</td> <td>2253</td> <td>465</td> <td>Extension for reply within third month</td> </tr> <tr> <td>1254</td> <td>1,450</td> <td>2254</td> <td>725</td> <td>Extension for reply within fourth month</td> </tr> <tr> <td>1255</td> <td>1,970</td> <td>2255</td> <td>985</td> <td>Extension for reply within fifth month</td> </tr> <tr> <td>1404</td> <td>320</td> <td>2401</td> <td>160</td> <td>Notice of Appeal</td> </tr> <tr> <td>1402</td> <td>320</td> <td>2402</td> <td>160</td> <td>Filing a brief in support of an appeal</td> </tr> <tr> <td>1403</td> <td>280</td> <td>2403</td> <td>140</td> <td>Request for oral hearing</td> </tr> <tr> <td>1451</td> <td>1,510</td> <td>2451</td> <td>1,510</td> <td>Petition to institute a public use proceeding</td> </tr> <tr> <td>1452</td> <td>110</td> <td>2452</td> <td>55</td> <td>Petition to revive - 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The Commissioner is authorized to: (check all that apply) <input type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input checked="" type="checkbox"/> Charge any additional fee(s) required under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20. <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account		FEE CALCULATION <table border="1"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>1001</td> <td>750</td> <td>2001</td> <td>375</td> <td>Utility filing fee</td> </tr> <tr> <td>1002</td> <td>330</td> <td>2002</td> <td>165</td> <td>Design filing fee</td> </tr> <tr> <td>1003</td> <td>520</td> <td>2003</td> <td>260</td> <td>Plant filing fee</td> </tr> <tr> <td>1004</td> <td>750</td> <td>2004</td> <td>375</td> <td>Reissue filing fee</td> </tr> <tr> <td>1005</td> <td>160</td> <td>2005</td> <td>80</td> <td>Provisional filing fee</td> </tr> <tr> <td colspan="2">SUBTOTAL (1)</td> <td colspan="2">(\$)</td> <td>750.00</td> </tr> </tbody> </table>		Large Entity		Small Entity		Fee Code	Fee (\$)	Fee Code	Fee (\$)	1001	750	2001	375	Utility filing fee	1002	330	2002	165	Design filing fee	1003	520	2003	260	Plant filing fee	1004	750	2004	375	Reissue filing fee	1005	160	2005	80	Provisional filing fee	SUBTOTAL (1)		(\$)		750.00																																																																																																																				
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SUBMITTED BY		Complete (if applicable)		
Name (Print/Type)	Eric S. Hyman	Registration No. (Attorney/Agent)	30,139	Telephone (310) 207-3800
Signature			Date	7/1/03